7			e October 1, 2		•		10175	7606
			ILED - PART	1		1010	<i>y</i>	100
TOTALC	LAIMS		(Column 1)	(Column 2)		MALL ENT	TITY OA	OTHER T
FOR ·			NUMBER FILED	EH 11 10 00 00 000	- -	RATE	FEE	RATE
TOTAL CH	ARGEABLE CL	AIMS .	minus 20=	NUMBER EXT	RA B	ASIC FEE 3	85.00 OR	BASIC FEE 77
NDEPENDENT CLAIMS		-	minus 3		-11	X\$ 9=	OR	X\$18=
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il the diffe	rence in colum	n 1 is less	than zero, enter	'O' in column o	<u>'</u>	145= .	OR	+290=
. · · ·	CLAIMS	AS AMEI	NDED - PART	II	7	OTAL	——/ L	TOTAL
	I CLAIM	<u>n 1)</u>	(Column HIGHES	(Column	<u>3)</u> SA	AALL ENTI	TY On a	OTHER THAN
511	REMAIN : AFTEI AMENDM	9	NUMBE PREVIOUS	R PRESEN	7	ADI	DI-	MALL ENTIT
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otal .	AMENDMEN	Minus	PADEOR	EXTRA	RAT	E TIONAL FEE	- RA	1101111
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al	•	Minus	MA .	=.		FEE	PATE	TIONAL FEE
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ST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					X43=		A X86=	1
intry in colum	n 1 is less than the	entry in colin	nn 2, write "0" in colu		+145=	0		
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קשהאו ופפויפי	er Previously Paid	For (Total or	SPACE is less than independent) is the h	3. enter '3."	שטוו. דבצ ב		ADDIT FEE	